



Tufts Literacy Corps Application

Name: _____ Tufts Student ID: _____

Campus Address: _____

Telephone: _____

Email: _____

Permanent Address: _____

Telephone: _____

Undergraduate Graduate Student Program/Major _____

Expected Date of Graduation: _____ TLC Program(s) you are interested in: _____

Do you have a car? yes no

How many hours do you want to work? 2-3 5 10

Please answer the following questions thoroughly. (Feel free to use more than the space provided.)

1. Why are you applying for work with the Tufts Literacy Corps? What do you hope to gain and learn from your participation in the program?
2. Have you worked with children in the past? If so, in what capacity?
3. What are your special interests? What might you like to share with children?
4. What do you hope children will gain from your work together?
5. What skills or areas of expertise would you bring to your work with the TLC? Is there something you are especially interested in contributing to the program?
6. What hours are you available to work?

<input type="checkbox"/> Weekday mornings (8:30 to 12:00)	M	T	W	Th	F
<input type="checkbox"/> Weekday afternoons between 12:00 and 4:00	M	T	W	Th	F
<input type="checkbox"/> Weekends and evenings	M	T	W	Th	F

Important: The TLC requires a full year commitment. You are welcome to change your schedule to accommodate second semester classes IF you can work it out with teachers and/or parents. However, it is very important to sustain the commitment you make to children and teachers through April.

7. Please write down the name and **email address** of one reference (a previous supervisor or employer).